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**ZILKA-KOTAB**

PC  
ZILKA, KOTAB & FEECE<sup>TM</sup>

95 SOUTH MARKET ST., SUITE 420  
SAN JOSE, CA 95113

TELEPHONE (408) 971-2573  
FAX (408) 971-4660

FAX COVER SHEET

Date: August 5, 2005	Phone Number	Fax Number
To: Examiner Chen		(571) 273-8300
From: Dominic M. Kotab		

Docket No.: HSJ920030118US1/HIT1P015

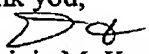
App. No: 10/613,559

Total Number of Pages Being Transmitted, Including Cover Sheet: 10

Message:

Please deliver to Examiner Chen.

Thank you,

  
Dominic M. Kotab

☐ Original to follow Via Regular Mail ☒ Original will Not be Sent ☐ Original will follow Via Overnight Courier

\*\*\*\*\*  
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\*\*\*\*\*

IF YOU DO NOT RECEIVE ALL PAGES OR IF YOU ENCOUNTER  
ANY OTHER DIFFICULTY, PLEASE PHONE Erica  
AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

August 5, 2005

AUG 05 2005

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of )

GILL )

Group Art Unit: 2652

Application No. 10/613,559 )

Examiner: CHEN, Tianjie.

Filed: 07/02/2003 )

Attorney Docket No. HIT1P015/  
HSJ920030118US1For: HEAD WITH THIN AFM WITH )  
HIGH POSITIVE )  
MAGNETOSTRICTIVE PINNED )  
LAYER )

Date: August 5, 2005

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents via facsimile to fax number: (571) 275-8300 on August 5, 2005.

Signed: 

Erica L. Farlow

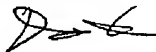
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 2233-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-5287.

Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees.

If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-5287 (Order No. HSJ920030118US1). A copy of this sheet is enclosed for billing purposes.Respectfully submitted,  
Zilka-Kotab, PCDominic M. Kotab  
Registration No. 42,762P.O. Box 721120  
San Jose, CA 95172-1120  
Telephone: (408) 971-2573

(Revised 1/96)

## PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of )

GILL )

Group Art Unit: 2652 )

Application No. 10/613,559 )

Examiner: CHEN, Tianjie. )

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HSJ920030118US1 )For: HEAD WITH THIN AFM WITH )  
HIGH POSITIVE )  
MAGNETOSTRICTIVE PINNED )  
LAYER )

Date: August 5, 2005 )

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patents via facsimile to fax number: (571) 273-8300 on August 1, 2005.

Signed: 

Erica L. Farlow

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 2233-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

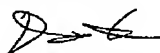
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Respectfully submitted,  
Zilka-Kotab, PC



Dominic M. Kotab  
Registration No. 42,762

P.O. Box 721120  
San Jose, CA 95172-1120  
Telephone: (408) 971-2573

(Revised 1/96)

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

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Application No. 10/613,559

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Group Art Unit: 2652

Examiner: CHEN, Tianjie.

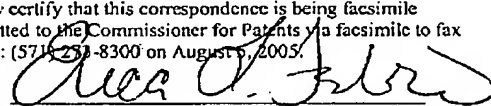
Attorney Docket No. HIT1P015/  
HSJ920030118US1

Date: August 5, 2005

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being facsimile  
transmitted to the Commissioner for Patents via facsimile to fax  
number: (571) 237-8300 on August 5, 2005.

Signed:

  
Erica L. Farlow

AMENDMENT A

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Examiner:

In response to the Office Action mailed June 9, 2005, please enter the following  
amendments believed to place the claims in condition for allowance.

HIT1P015/HSJ920030118US1

- 1 -